RECEIVED FEC MAIL CENTER

2010 AUG 23 AM 8: 05

STATEMENT OF

FORM 1		ORGANIZATION				Office Use Only	
1. NAME OF COMMITTEE (in	n full)	11 11 10 10 10	eck if name hanged)	Example:If typing, ty over the lines.	ype 12FE4I	M5	
•	_		\		TI DIN 14	MMITTEE!	
16940 4 SULVER PAR)							
ADDRESS (number a	5055 TOPANGA GANYON BLUD						
(Check if address is changed)		SUITE 339					
		Maai	CAND	HUGUS		91367-	
				CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)							
(Check if	addrass	MAP	LEQY	AHOO. GOM			
is change							
COMMITTEE'S WEB PAGE ADDRESS (URL)							
(Check if address is changed)							
2. DATE 0.8 1.1 2010							
3. FEC IDENTIFICATION NUMBER							
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)							
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Type or Print Name of Treasurer Nictors A. Pyle							
Type or Print Name of Treasurer NICHOLAS A. PYLE Signature of Treasurer Date Date Date							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.							
Office Use Only				For further Inform Federal Election Toll Free 800-424-	Commission 9530	FEC FORM 1 (Revised 02/2009)	